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# Standards of Child Welfare

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AS a singular by-product of the Great War it is possible to set forth with some precision the standards of child welfare generally accepted in the United States at the end of the second decade of the twentieth century. This does not mean standards uniformly in operation in the forty-eight states. But it is fair to say that they sum up the judgment of acknowledged students and practical authorities throughout the United States, and that examples exist of states or communities or voluntary organizations which have attained or exceeded any standards set forth in the statement which is the basis of this paper. I refer to the Minimum Standards for Child Welfare adopted by the Washington and Regional Conferences on Child Welfare in 1919.

In the spring of 1919 a series of conferences on standards of child welfare concluded the popular program of "Children's Year"—that second year after our entrance into the War when many millions of civilians added to all possible service for our soldiers, a further work of patriotism in carrying through a nationally organized plan of demonstrating and publishing the needs and rights of children. "Children's Year" was undertaken by the Children's Bureau of the Department of Labor by means of an allotment of \$150,000 from the President's War Fund, an allotment which was accompanied by a letter from President Wilson in which he said: "Next to the duty of doing everything possible for the soldiers at the front, there could be, it seems to me, no more patriotic duty

than that of protecting the children, who constitute one-third of our population. . . . I trust . . . that the work may so successfully develop as to set up certain irreducible minimum standards for the health, education, and work of the American child." The Woman's Committee of the Council of National Defense joined at once with the bureau and set in motion its vast network of agencies throughout Continental United States and the Island Possessions.

## CHILDREN'S YEAR ACTIVITIES AND RESULTS

A series of observances was continued throughout the year beginning April 6, 1918, and the child welfare conferences of May and June, 1919, followed as a conclusion.

The first activity was a weighing and measuring test of children under six years of age. Upon authorized requests of local committees, over 7,000,000 record cards were provided by the bureau, most of which were used. The card showed a scale of height and weight in relation to age and was in two parts, one to be kept by the parents so that they might in each case preserve a record of the child's relation to the normal standard. In certain communities the testing was done with scientific precision and the records gave new and valuable data regarding weight and height of children according to nationality of parents, geographical location and other conditions. From the forms returned to the Children's Bureau, records of 167,024 white children were selected with the

advice of consulting authorities on pediatrics, anthropology and statistics, and new tables of stature and weight of boys and girls by month of age up to six years have been prepared and published in a report including other significant data derived from the record cards.

Many children, also, received complete physical examinations by competent physicians, and unsuspected defects were discovered and corrected. But whether the child was weighed on the farm scales by his own parents who themselves sent to the bureau for a record form, or was carefully examined by a distinguished pediatricist who gave his services to the cause, each child's record was an unforgettable object lesson to all the surrounding adults, showing a definite relation between age and normal growth, and warning that marked divergence calls for attention.

Further results of this activity have been the addition of child hygiene divisions to state health departments in a largely increased number of states, a marked nation-wide increase in the development of local child-health centers, and the growing unsatisfied demand for trained public health nurses for rural as well as urban areas. Although not an outgrowth of Children's Year, the effort to develop and standardize the training of public health nurses is of great importance to the effectiveness of child hygiene standards, and the study of nurses' training schools now under way by the Rockefeller Foundation is pertinent to this discussion. It will undoubtedly aid in standardizing the training of public health nurses and will tend to improve the efficiency of all child-health agencies.

I have dwelt upon the Children's Year activity for infants and young children because its standardizing effect was obvious and its reach far wider than that of the other activities of the

year. It is to be regretted that funds were not available to develop demonstrations for all the groups of children with the same individual attention given those under six.

A recreation program was also carried out, with special reference to rural children. In this the Playground and Recreation Association of America and the club and demonstration directors of the Department of Agriculture gave much help and an admirable pageant was written for the program by the Drama League of America. The influence of the recreation drive was widespread. It emphasized the importance of vigorous, active sports, team play whether in dramatic production or on the athletic field, well-equipped playgrounds in rural centers and in connection with rural schools, and the aid to health afforded by athletic play properly supervised.

The year concluded with a Back-To-School drive which was especially needed because the high pay in war industries had drawn many children from school. The value of schooling, at least to the age of sixteen, as a fairly certain guarantee of better earning power throughout life, was shown in popular addresses, in a series of printed statements widely distributed and by the work of local committees in coöperation with school authorities. In localities where visits were made to absentees under sixteen with the purpose of discovering if they could return to school, a largely increased attendance, especially in the higher grammar and high school grades, was reported.

#### CONFERENCES ON CHILD WELFARE STANDARDS

Fragmentary as the year's activities, of necessity, were, they reached out over the country to a degree entirely new and indeed unexpected, and greatly strengthened a nation-wide un-

derstanding of the importance of child welfare as a national issue. It was, therefore, natural to conclude the year by a summing up of national opinion on standards of child welfare, in accordance with President Wilson's letter.

Because of the crowded living conditions due to the War the calling of large assemblies in Washington was not permitted. Hence, a small meeting of specialists in Washington was followed by a series of regional conferences. This, in fact, was an advantage, since the regional conferences extending from Boston to San Francisco resulted in wide discussion and valuable criticism of the standards tentatively submitted at the Capital. A special committee of five met later in Washington to consider all suggestions and the standards were published as approved by this committee. All the meetings of the successive conferences were given great inspiration by the presence and counsel of authorities on child welfare from the countries of our principal allies who came as guests of the government. Under unspeakable war hardships, these men and women had devoted themselves to the protection of the young of their nations and had demonstrated the effectiveness of intelligent care in saving life and protecting children as far as possible from the effects of war. Their influence could not fail to emphasize the public responsibility of any modern nation for child welfare standards.<sup>1</sup>

In the final report of the conferences, the standards are set forth under three heads:

Public protection of the health of mothers and children;

Children entering employment;  
Children in need of special care.

#### PROTECTION OF THE HEALTH OF MOTHERS AND CHILDREN

The conditions stated as essential to the protection of maternity, infancy and childhood are as follows:

*First*, as to maternity:

Maternity or prenatal centers sufficient to provide for all cases not receiving prenatal supervision from private physicians; the work of such centers to include adequate medical examination, instruction in the hygiene of maternity and infancy, adequate instruction and care in the home afforded by visiting public-health nurses and adequate medical and nursing care at confinement, whether in the home or in the hospital, with sufficient household service for four or six weeks to allow the mother to recuperate.

Clinics for needed treatment during pregnancy.

Hospitals sufficient to provide for all complicated cases and for all women wishing hospital care; free or part-payment obstetrical care in every necessitous case.

Licensing and supervision of all midwives.

Adequate income to allow the mother to remain in the home through the nursing period.

Education of the general public as to the problems presented by maternal and infant mortality and their solution.

*Second*, as to infants and pre-school age children:

Complete birth registration.

Prevention of infantile blindness.

Children's health centers to give health instruction, under medical supervision, for the care of all infants and children not under care of a private physician, including instruction in breast feeding and in all matters of

<sup>1</sup> Printed copies of the Minimum Standards for Child Welfare and a limited number of copies of the proceedings of the 1919 conferences are available for free distribution upon application to the Children's Bureau, U. S. Department of Labor, Washington.

home care and hygiene of infancy and childhood, and to provide or to coöperate with sufficient numbers of public-health nurses to make home visits to all infants and children of pre-school age needing care.

Dental and other clinics.

Children's hospitals or hospital beds and provision for medical and nursing care at home sufficient to care for all sick infants and young children.

State licensing and supervision of all child-caring institutions in which infants or young children are cared for.

General educational work in prevention of communicable disease and in hygiene and feeding of infants and young children.

*Third*, as to school children:

Proper location, construction, hygiene, ventilation and sanitation of school house; no over-crowding.

Adequate playground and recreational facilities, physical training and supervised recreation.

Adequate medical and nursing school service; full-time school nurse to give instruction in personal hygiene and diet, to make home visits, advising and instructing mothers in principles of hygiene, and to take children to clinics with permission of parents.

Complete standardized basic physical examination by physicians once a year, with determination of weight and height at beginning and end of each school year; monthly weighing where-ever possible.

Continuous health record for each child to be kept on file with other records of pupil; this should be a continuation of the pre-school health record which should accompany the child to school.

Supervision to control communicable disease, available clinics for dentistry, nose, throat, eye, ear, skin and orthopedic work, and free vaccination against smallpox.

Open-air classes with rest periods and supplementary feedings for pre-tuberculous and certain tuberculous children and children with grave malnutrition; nutrition classes; examinations by specialist of retarded or atypical children.

Education of the school child in health habits, including hygiene and care of young children.

General educational work in health and hygiene, including education of parent and teacher to secure full coöperation in health program.

*Fourth*, as to adolescent children:

Complete standardized basic physical examination by physician, including weight and height, at least once a year, and recommendations for treatment if needed.

Clinics for treatment of defect and disease.

Supervision and instruction to insure ample diet, with special attention to growth-producing foods; sufficient sleep, rest, and fresh air; adequate and suitable clothing; proper exercise for physical development; knowledge of sex hygiene and reproduction.

Full-time, compulsory education to at least sixteen years of age, adapted to meet the needs and interest of the adolescent mind, with vocational guidance and training.

Clean, ample recreational opportunities to meet social needs, with supervision of commercial amusements.

Legal protection from exploitation, vice, drug habits, etc.

Thus far, the standards are those of medical and health authorities who approach the problem of safeguarding childhood on the health side, and the full statement strongly emphasizes the necessity for the education of the general public, of parent and teacher, and of the adolescent child in those matters which he is by that time considering for himself. A decent home and decent

income are plainly assumed as basic to effective health protection.

#### STANDARDS FOR CHILDREN ENTERING EMPLOYMENT

The Minimum Standards for Children Entering Employment require an age minimum of 16 for employment in any occupation, save that children between 14 and 16 may be employed in agriculture and domestic service during vacation periods.

The educational minimum would require all children between 7 and 16 years of age to attend school for at least nine months each year, continuation schools to be provided for all between 16 and 18 who are regularly and legally employed and who have not completed the high-school grade, and vacation schools to be provided for all.

The physical minimum would require: That a child shall not go to work until a physical examination by an authorized medical officer has shown him to be of normal development for his age and physically fit for the work he is to perform.

It is further recommended:

That all working children under the age of 18 years have an annual physical examination.

That hours of employment be not more than eight hours a day or forty-four hours a week for all minors.

That the hours spent at continuation schools by children under 18 years of age be counted as part of the working day.

That night work for minors be prohibited between 6 p. m. and 7 a. m.

That employment certificates be issued to all entering employment who are under 18 years of age, the issuance to be under state supervision and only after the issuing officer has received and filed satisfactory evidence of age, physical fitness, completion of eighth

grade of school and promise of employment.

The laws of no state have yet embraced all the standards here set forth; the extent to which they are approximated is indicated by the following statement of general requirements in force January 1, 1921 (some of which are subject to qualification and exemption):

Seven states have an age minimum of 15 years or over; 29 provide an eight-hour day for children under 16, and 41 prohibit their work at night (the eight-hour day and the night-work provisions are also found in the Federal child labor tax law); all states have compulsory school attendance laws, effective to varying ages; 22 states have continuation school laws containing compulsory provisions; 19 require every child applying for a regular employment certificate to be examined by a physician.

As a result of action taken during the child welfare conferences, a committee of eleven physicians was appointed by the Children's Bureau to formulate definite standards of normal development and sound health, for the use of physicians in examining children applying for work permits. The preliminary report of this committee has been published by the bureau; it contains general recommendations, detailed minimum standards of physical fitness, and a discussion of methods to be employed in making physical examinations.

#### STANDARDS RELATING TO CHILDREN IN NEED OF SPECIAL CARE

These standards begin by affirming, in all essentials, the conclusions of the White House Conference of 1909 on the care of dependent children.<sup>2</sup> Then fol-

<sup>2</sup> The first instance of a Presidential conference on child welfare was that called by President Roosevelt in 1909 to consider a single phase of

lows a statement from which the following paragraphs are quoted:

The fundamental rights of childhood are normal home life, opportunities for education, recreation, vocational preparation for life, and moral, religious, and physical development in harmony with American ideals and the educational and spiritual agencies by which these rights of the child are normally safeguarded.

Upon the state devolves the ultimate responsibility for children who are in need of special care by reason of unfortunate home conditions, physical or mental handicap, or delinquency. Particular legislation is required to insure for such children the nearest possible approach to normal development.

Home life which is, in the words of the conclusions of the White House Conference, "the highest and finest product of civilization," cannot be provided except upon the basis of an adequate income for each family.

The policy of assistance to mothers who are competent to care for their own children is now well established. It is generally recognized that the amount provided should be sufficient to enable the mother to maintain her children suitably in her own home, without resorting to such outside employment as will necessitate leaving her children without proper care and oversight; but in many states the allowances are still entirely inadequate to secure this result under present living costs. The amount required can be determined only by careful and competent case study, which must be renewed from time to time to meet changing conditions.

The statement emphasizes the importance of a responsible state supervising body to inspect and license every institution, agency or association which receives or cares for mothers with children, or children who are delinquent, dependent or without suitable parental

care—with authority to revoke licenses for cause and to prescribe forms of registration and report. The state agency should further maintain such visiting of children in institutions or placed in family homes as will insure their proper care, training and protection.

No child should be permanently removed from his own home unless it is impossible to make the home safe for the child or his continuance in the home safe for the community.

The aim of all provision for children who must be removed from their own homes should be to secure for each child, home life as nearly normal as possible. "To a much larger degree than at present, family homes may be used to advantage in the care of such children."

The principles which should govern all placing of children in foster homes and the supervision of children placed in institutions are given in considerable detail.

Modern principles for the care of illegitimate children are stated with the special attention which is needed if the handicaps of children born out of wedlock are in any degree to be counterbalanced. A series of special conferences on the legal protection of illegitimate children, held in 1920, resulted in the adoption of certain conclusions, most of which have since been embodied in the draft of a model law prepared by a committee of the National Conference of Commissioners on Uniform State Laws.

The care of physically and mentally defective children is discussed with two guiding principles: First, unceasing study of the children themselves, their environment and background; second, the greatest practicable degree of individual development and freedom compatible with safety for the child and for the community.

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the subject—the care of dependent children. This is known as the White House Conference, and the permanent value of its formulations is unquestioned.

Perhaps at no point do the standards indicate a more truly scientific advance in method than in considering feeble-minded children. Although recognizing the necessity of adequate institutional provision for the feeble-minded, differentiation of treatment based on intensive study of individuals and types is also advised.

Although the principle of the juvenile court is accepted throughout the country, the standards require conditions some of which may be found in most courts, though, unfortunately, few courts will be found in which all are observed: *i.e.*, separate hearings of children's cases, special detention apart from adults, adequate investigation for every case, provision for physical and mental examinations, trained probation officers, women officers for girls' cases, the recording and filing of social as well as legal information, procedure under chancery jurisdiction and juvenile records not to stand as criminal records. Wherever possible, administrative duties, such as child-placing and relief, should not be required of juvenile courts. Adult sex offenders against children should be dealt with in juvenile courts to the end that victims may be spared "publicity and further corruption." Following a juvenile court conference held in June, 1921, under the auspices of the Children's Bureau and the National Probation Association, a committee has been appointed by the bureau to consider standards of juvenile court organization and procedure.

The application of all the above standards to rural children in need of special care is pointed out, as well as the need for increased social service in rural areas, and the statement closes with the following appeal for scientific method:

There is urgent need of a more adequate body of scientific literature dealing with

principles and practice in the children's field of social work, and the meeting of this need is a responsibility resting on those so engaged. Careful interpretation and analysis of methods and results of care and the publishing of these findings must precede the correcting of many present evils in practice. Boards of directors, trustees, and managers should particularly consider participation in the preparation of such a body of facts and experience as being a vital part of the work of their staff members.

#### THE SCIENTIFIC APPROACH TO CHILD WELFARE

At the end of the whole statement of standards are placed three paragraphs which indicate the spirit in which they were framed and the recognition of constant study and research as the only method of making experience fruitful:

Economic and social standards.

At the general session of the Washington conference the economic and social aspects of child welfare standards were discussed. While detailed standards were not formulated in this wide field, it was recognized that an adequate wage for the father, wholesome and pleasant housing and living conditions, and the abolition of racial discrimination are fundamental to the realization of any child welfare program.

Recreation.

The desire for recreation and amusement is a normal expression of every child, which must be considered in any program for the physical and moral education of children. Parents and others charged with their care should be educated as to the importance of recreation. Public provision should be made for wholesome play and recreation, both indoor and outdoor, under trained leadership, and especially adapted to the different age periods of the child.

Commercialized amusements should be safeguarded by official supervisors having a scientific knowledge of recreation.

Child welfare legislation.

The child welfare legislation of every state requires careful reconsideration as a



whole at reasonable intervals, in order that necessary revision and coördination may be made and that new provisions may be incorporated in harmony with the best experience of the day. In states where children's laws have not had careful revision as a whole within recent years, a child welfare committee or commission should be created for this purpose. Laws enacted by the several states should be in line with national ideals and uniform so far as desirable in view of diverse conditions in the several states.

Child welfare legislation should be framed by those who are thoroughly familiar with the conditions and needs of children and with administrative difficulties. It should be drafted by a competent lawyer in such form as to accomplish the end desired by child welfare experts and at the same time be consistent with existing laws.

It must be recognized that in our day no complete child welfare standards will be written; they must be subject to review and alteration according to the discoveries of physical and social science. These standards are incomplete, uneven and in some respects superficial, bearing witness to our fragmentary knowledge of child welfare and our imperfect view of the essentials of sound society. But they are invaluable because they are the first nationwide attempt to deal with the welfare of all children as a single problem in the social field, requiring in its working-out, the coördinated efforts of physicians, teachers, students of many sciences and practical social workers.

The committees who prepared the standards have reiterated under the different headings the necessity for a scientific approach to every problem of child welfare, whether of universal or special application. Indeed, it is impossible to avoid the conclusion that adequate support of research in the various interwoven problems of child welfare would prove of immediate

practical value to general social progress in our country. Without constant observation of actual experience reported intelligibly to the public we must continue to waste life, vigor and money to an unnecessary degree. Lavish gifts and bequests to answer imaginary needs will continue, and money will be withheld where it should be expended.

However, encouraging proofs are to be seen of the growth of the method of scientific research in the child welfare field. None is more significant than the comparatively recent interest in the study of child welfare legislation in the states. Twenty-four states and the District of Columbia, by special commissions, have reviewed or are now reviewing their laws, comparing them with those of other states, studying the existing needs of children in their own states, and formulating coherent programs to meet their legislative problems of child welfare; the advance in wise legislation is already marked. Plainly the task begun by such commissions cannot end. Laws once secured must be watched in operation and amended, repealed, superseded, as experience indicates. Another encouraging sign is the present tendency to discuss special problems through nationally representative scientific committees and to publish results or conclusions which may serve as a basis for needed legislation, or for voluntary activity, or as a contribution toward the solution of a baffling problem.

This scientific method is slow but it is also revolutionary. It ends the easy indifference of the fatalist; it destroys the respectability of giving money without knowing life. It invites the indispensable service of able and highly-trained students to examine and standardize progressively the child welfare aspects of applied social science.